PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10735213

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER					
TOTAL CLAIMS			29		(Con	(Column 2)		TYPE [T	OR 7		ENTITY	
FOR			NUMBER FILED		NILIMA	BER EXTRA		BASIC FEE	FEE 385.00	1_	RATE BASIC FEE	FEE	
		ABLE CLAIMS	200		NOIVIL		٠	DAGIO I EL	363.00	JOR	BASIC FEE	770.00	
			2 minus 20=		*	9		X\$ 9=		OR	X\$18=	162	
 	DEPENDENT C			inus 3 =) -		X43=		OR	X86=	8%	
L		NDENT CLAIM P	<u>.</u>					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	1018	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN					
_	<u> </u>	(Column 2)			(Column 3)		SMALL		OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AM	Independent	*	Minus	***	01.4184	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
							L	TOTAL		וייין	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								DDIT. FEE		• '	ADDII. FEE I		
8		CLAIMS REMAINING		HIGHE NUMB	ST	PRESENT	Ιг		ADDI-		I	ADDI-	
AMENDMENT B		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus ***			=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								.445			000		
								+145= TOTAL		OR	+290=		
										OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)	ı _						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
¥ L	Independent		Minus	***		=	-	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							/		OR	700=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
***!!	the "Highest Nun the "Highest Nun	nber Previously Pain nber Previously Pain nber Previously Pain	d For" IN THIS d For" IN THIS	SPACE is I	ess than	20, enter "20." 3, enter "3."		TOTAL DDIT. FEE			TOTAL DDIT. FEE		